

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

IUOE OPERATING ENGINEERS

ADDRESS (number and street)

1375 VIRGINIA DR.

☐Check if different  
than previously  
reported. (ACC)

FT. WASHINGTON

PA

19034

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00136739

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2009

through

12

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES JAMES JONES

Signature of Treasurer

Electronically Filed by JAMES JAMES JONES

Date

01

07

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
IUOE OPERATING ENGINEERS

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>Y Y Y 2009</div>		5104.23
(b) Cash on Hand at Beginning of Reporting Period .....	1417.42	
(c) Total Receipts (from Line 19) .....	32461.84	156490.03
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	33879.26	161594.26
7. Total Disbursements (from Line 31) .....	33790.00	161505.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	89.26	89.26
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

IUOE OPERATING ENGINEERS

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	32461.84	156490.03
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	32461.84	156490.03
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	32461.84	156490.03
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	32461.84	156490.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	32461.84	156490.03

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	32790.00	160505.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	33790.00	161505.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33790.00	161505.00	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 21

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	32461.84	156490.03
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	32461.84	156490.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

COREY COREY O'BRIEN FOR CONGRESS

Mailing Address P.O. BOX 653

City  
SCRANTON

State  
PA

Zip Code  
18501

Purpose of Disbursement  
CAMPAIGN CONTR.

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 11

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.6469

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

RAFFERTY FOR SENATE

Mailing Address P.O. BOX 436

City  
WORCESTER

State  
PA

Zip Code  
19490

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: PA District: 44

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.6443

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

1000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC COMM. ABINGTON &amp; ROCKLEDGE DEMO COMM

Mailing Address P.O. BOX 132

City  
ABINGTONState  
PAZip Code  
19001Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6422

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	9

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

BERNARD BERNARD FOR FREEHOLDER

Mailing Address BOX 428

City  
MT HOLLYState  
NJZip Code  
08060Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6406

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	9

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

BRENNAN BRENNAN FOR STATE REP.

Mailing Address 1201 DELAWARE AVE.

City  
BETHLEHEMState  
PAZip Code  
18015Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6385

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

JOHN CITIZENS FOR JOHN MORGANELLI

Mailing Address 835 BARNSDALE RD.

City  
BETHLEHEMState  
PAZip Code  
18017Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6430

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN CITIZENS FOR JOHN MORGANELLI

Mailing Address 835 BARNSDALE RD.

City  
BETHLEHEMState  
PAZip Code  
18017Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6441

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	9

Amount of Each Disbursement this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

KORN CITIZENS FOR KORN

Mailing Address P.O. BOX 2909

City  
WILMINGTONState  
DEZip Code  
19800Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6456

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	9	/	2	0	0	9

Amount of Each Disbursement this Period

1200.00

SUBTOTAL of Disbursements This Page (optional) .....

4200.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

DELAWARE COMM FOR DEL COUNTY FUTURE

Mailing Address 231 GOLF VIEW RD

City  
ARDMOREState  
PAZip Code  
19003Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6383

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00
---------

**B.**

Full Name (Last, First, Middle Initial)

ANNE COMM TO ELECT ANNE LAZOSOU

Mailing Address 1515 MARKET ST - STE 8410

City  
PHILADELPHIAState  
PAZip Code  
19102Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6437

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	0	9

Amount of Each Disbursement this Period

500.00
--------

**C.**

Full Name (Last, First, Middle Initial)

MARC COMM TO ELECT MARC GERGELY

Mailing Address 1985 LINCOLN WAY - STE 23-314

City  
WHITE OAKState  
PAZip Code  
15131Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6431

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	0	9

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

SEITH COMM TO ELECT SEITH WILLIAMS

Mailing Address 7102 GERMANTOWN AVE.

City  
PHILADELPHIAState  
PAZip Code  
19119Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6424

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	9

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL COMM TO RE ELECT M.STACK

Mailing Address P.O. BOX 391

City  
HARRISBURGState  
PAZip Code  
17105Purpose of Disbursement  
CAMPAIGN CNTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6444

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	5	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

COMMITTEE COMM TO SECURE BRISTOL FUTURE

Mailing Address 220 RADCLIFFE ST

City  
BRISTOLState  
PAZip Code  
19007Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6403

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

3500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

DELAWARE COUNTY DEL. COUNTY REP. FINANCE COMM

Mailing Address 323 W. FRONT ST.

City  
MEDIA

State  
PA

Zip Code  
19063

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6400

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

DOUPLE DOUPLE FOR JUDGE

Mailing Address P.O. BOX 235

City  
DOYLESTOWN

State  
PA

Zip Code  
18901

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6404

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

THOMAS ELECTION FUND OF THOMAS GIBLIN

Mailing Address P.O. BOX 43062

City  
MONTCLAIR

State  
NJ

Zip Code  
07043

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6428

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.** Full Name (Last, First, Middle Initial)  
JAMES FIRM OF US TAX CONSULTANTS

Mailing Address 2801 MAXWELL ST.

City PHILA. State PA Zip Code 19136

Purpose of Disbursement  
ACCOUNTANT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6388

Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

150.00

**B.** Full Name (Last, First, Middle Initial)  
JAMES FIRM OF US TAX CONSULTANTS

Mailing Address 2801 MAXWELL ST.

City PHILA. State PA Zip Code 19136

Purpose of Disbursement  
ACCOUNTANT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6429

Date of Disbursement

10 / 27 / 2009

Amount of Each Disbursement this Period

150.00

**C.** Full Name (Last, First, Middle Initial)  
JAMES FIRM OF US TAX CONSULTANTS

Mailing Address 2801 MAXWELL ST.

City PHILA. State PA Zip Code 19136

Purpose of Disbursement  
ACCOUNTANT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6447

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.** Full Name (Last, First, Middle Initial)  
**BRENDEN FRIENDS OF BRENDEN BOYLE**

Mailing Address 9741 CHAPEL RD.

City PHILADELPHIA State PA Zip Code 19115

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6448

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JIM FRIENDS OF DA JIM GOODMAN**

Mailing Address 21 COTTAGE HILL W

City POTTSVILLE State PA Zip Code 17901

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6387

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	9

Amount of Each Disbursement this Period

750.00

**C.** Full Name (Last, First, Middle Initial)  
**JAMES FRIENDS OF JIM MATHEWS**

Mailing Address 624 HAZELHURST

City MERION STATION State PA Zip Code 19066

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6450

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.** Full Name (Last, First, Middle Initial)  
**KEARNEY FRIENDS OF KEARNEY/FRASCATORE**

Mailing Address 909 MARSHALL DR

City State Zip Code  
**WARMINSTER PA 18904**

Purpose of Disbursement  
 CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB29.6391**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**MATT FRIENDS OF MATT BRADFORD**

Mailing Address P.O. BOX 349

City State Zip Code  
**NORRISTOWN PA 19404**

Purpose of Disbursement  
 CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB29.6453**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**NICK FRIENDS OF NICK MICCARELLI**

Mailing Address 901 11TH AVE

City State Zip Code  
**PROSPECT PARK PA 19076**

Purpose of Disbursement  
 CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB29.6434**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**2000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 21

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.** Full Name (Last, First, Middle Initial)  
MIKE FRIENDS TO ELECT MIKE MCGEEHAN

Mailing Address 4401 COTTMAN AVE

City PHILA. State PA Zip Code 19135

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6402

Date of Disbursement

10 / 12 / 2009

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
MIKE FRIENDS TO ELECT MIKE MCGEEHAN

Mailing Address 4401 COTTMAN AVE

City PHILA. State PA Zip Code 19135

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6421

Date of Disbursement

10 / 21 / 2009

Amount of Each Disbursement this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
DUKE FRIENDS OF SHERIFF D.DONNELLY

Mailing Address 1835 LAFAYETT DR

City SOUTHAMPTON State PA Zip Code 18966

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6395

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

GREENLEE GREENLEE FOR COUNCIL AT LARGE

Mailing Address 2932 OGDEN ST.

City  
PHILA.State  
PAZip Code  
19130Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6398

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	9

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

HATFIELD HATFIELD TOWNSHIP REP. COMM

Mailing Address 1855 CREEK RD

City  
HATFIELDState  
PAZip Code  
19440Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6409

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	0	9

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

JOE J.MARKOSEIC FOR STATE LEGISLAT

Mailing Address P.O. BOX 193

City  
MONROEVILLEState  
PAZip Code  
15146Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6393

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

JIM JIM BRIGES FOR STAT REP.

Mailing Address P.O. BOX 62193

City  
KING OF PRUSSIAState  
PAZip Code  
19406Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6454

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MONTGOMERY MONTGOMERY COUNTY AFL-CIO COPE

Mailing Address 2015 AUDUBON RD

City  
AUDUBONState  
PAZip Code  
19403Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6389

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	9

Amount of Each Disbursement this Period

900.00

**C.**

Full Name (Last, First, Middle Initial)

FRANK NEIGHBORS TO REELECT DICICCO

Mailing Address P.O. BOX 33626

City  
PHILA.State  
PAZip Code  
19107Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6436

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2400.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.** Full Name (Last, First, Middle Initial)  
PARKSIDE PARKSIDE DEMO. COMM

Mailing Address 303 BEECHWOOD RD.

City State Zip Code  
BROOKHAVEN PA 19015

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6414

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
BURNS RE-ELECT JUDGE BURNS

Mailing Address 1 OXFORD VALLEY STE. 351

City State Zip Code  
LANGHORNE PA 19047

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6381

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
REPUBLICAN REP. CITY COMM.

Mailing Address 1700 BENJAMIN FRANKLIN PKWY  
THE WINDSOR LOWER LEVEL

City State Zip Code  
PHILA PA 19103

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.6401

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

RIDLEY RIDLEY TWP REP. ORGANIZATION

Mailing Address P.O. BOX 9

City  
WOODLYNState  
PAZip Code  
19094Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6399

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	9

Amount of Each Disbursement this Period

240.00

**B.**

Full Name (Last, First, Middle Initial)

SCHUYKILL SCHUYKILL COUNTY DEMO PARTY

Mailing Address 610 W. MARKET ST - P.O. BOX 66

City  
POTTSVILLEState  
PAZip Code  
17901Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6426

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

SWEENEY SWEENEY FOR FREEHOLDER

Mailing Address 300 N. MORRON AVE

City  
WENONAHState  
NJZip Code  
08090Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6452

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1740.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

**A.**

Full Name (Last, First, Middle Initial)

UNITED THE UNITED REP. CLUB

Mailing Address 1205 LOCUST ST. STE 100

City  
PHILA.State  
PAZip Code  
19107Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6449

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	0	9

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

TOMLINSON TOMLINSON FOR STATE SENATE

Mailing Address 2207 BRISTOL PIKE

City  
BENSALEMState  
PAZip Code  
19020Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6451

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	0	9

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

THOMAS TRIBUTE TO THOMAS J. JUDGE SR

Mailing Address 323 W. FROMT ST

City  
MEDIAState  
PAZip Code  
19063Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6419

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	9

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

WARRINGTON WARRINGTON DEMO CAMPAIGN COMM

Mailing Address 100 FIDDLE LEAF LN

City  
WARRINGTON

State  
PA

Zip Code  
18976

Purpose of Disbursement  
CAMPAIGN CONTRI.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6397

Date of Disbursement

<sup>M</sup>  <sup>M</sup> /  <sup>D</sup>  <sup>D</sup> /  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

500.00

TOTAL This Period (last page this line number only) .....

31990.00